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Amendment and Response To Non-Final Office Action (10 pages)

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Application No.:

10/824,380

Filing Date:

April 15, 2004

Applicant(s):

Jeffrey GULLICKSEN et al.

Title:

VIRTUAL LINE SWITCHED RING (VLSR)

CONNECTION STATE DISTRIBUTION

**SCHEME** 

Examiner:

Frank Duong

Art Unit:

2616

Attorney Docket No.:

10.0404.DIV

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Barbara C. Brown

North Carolina State Bar/Certified Paralegal

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PTO/SB/21 (09-04)
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the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/824,380 Filing Date TRANSMITTAL April 15, 2004 First Named Inventor Jeffrey GULLICKSEN et al. **FORM** Art Unit 2616 **Examiner Name** Frank Duong (to be used for all correspondence after initial filing) Attorney Docket Number 10.0404.DIV Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC Fee Transmittal Form (2 copies) Drawing(s) Appeal Communication to Board Licensing-related Papers of Appeals and Interferences Fee Attached Appeal Communication to TC **/** Petition (Appeal Notice, Brief, Reply Brief) Amendment/Reply (10 pages) Petition to Convert to a **Proprietary Information** After Final Provisional Application Power of Attorney, Revocation Status Letter Change of Correspondence Address Affidavits/declaration(s) Other Enclosure(s) (please Identify **Terminal Disclaimer** below): Extension of Time Request (1-mo.) Request for Refund **Express Abandonment Request** CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Reply to Missing Parts/ Return Receipt Postcard Incomplete Application **Express Mail Certificate** Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name DOUGHERTY CLEMENTS Signature Printed name Christopher L. Bernard Reg. No. Date 48,234 July 5, 2006 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature arkara a Brown

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Barbara C. Brown

Typed or printed name

Date

July 5, 2006

PTO/SB/17 (12-04v2)
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Effective on 12/08/2004.  Appropriations Act, 2005 (H.R. 4818).		Complete if Known			
		<ul> <li>Application Number</li> </ul>	10/824,380		
FEE TRANSMITTAL For FY 2005		Filing Date	April 15, 2004		
		First Named Inventor	Jeffrey GULLICKSEN	ffrey GULLICKSEN et al.	
Applicant claims small entity status. See 37 CFR 1.27		Examiner Name	Frank Duong		
		Art Unit	2616		
TOTAL AMOUNT OF PAYMENT	(\$) 120.00	Attorney Docket No.	10.0404.DIV		
METHOD OF PAYMENT (check all that apply)					
Check Credit Card Money Order None Other (please identify):					
Deposit Account Deposit Account Number: Deposit Account Name:					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee					
Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments					
under 37 CFR 1.16 and 1.17  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card					
Information and authorization on PTO-2038.					
FEE CALCULATION  A PASIC FILING SEARCH AND EVAMINATION FEES					
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES					
Application Type Fee (	Small Entity	Small Entity	Small Entity e (\$) Fee (\$)	Fees Pald (\$)	
Utility 300			00 100		
Design 200					
Plant 200					
Reissue 300	7.7	100	-		
Provisional 200		0 0	0 0 =		
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$)  Small Entity Fee (\$) Fee (\$)  25  200 100  180  Multiple Dependent Claims					
- 20 or HP =  HP = highest number of total claims p  Indep. Claims Extra (  - 3 or HP =  HP = highest number of independent of	aid for, if greater than 20.  Claims Fee (\$)	ee Paid (\$)	<u>Fee (\$)</u>	Fee Pald (\$)	
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  - 100 = / 50 = (round up to a whole number) x =					
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Fees Paid (\$)					
Other (e.g., late filing surcharge): Fee(s) for 1-Mo. Extension of Time \$120.00					
SUBMITTED BY ,					
Registration No. 48 234 Telephone 704/366-6642					
Name (Print/Type)   Christopher L	(Attorney/Agent) 40,20				

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.